



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
)
KATSURA et al.)
)
Application Number: 10/764,561) Art Unit 3736
)
Filed: January 27, 2004)
)
For: OPTICAL MEASUREMENT) Examiner
APPARATUS FOR A LIVING BODY) Toth, Karen E.
)
)
Attorney Docket No. HIT A.0502)

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

LETTER TO THE OFFICE DRAFTSPERSON

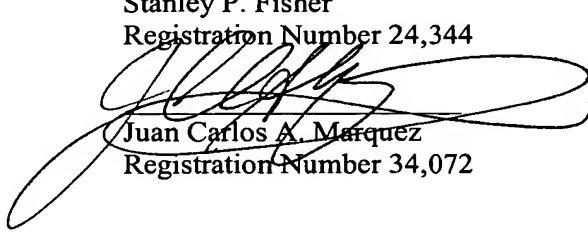
Sir:

Submitted herewith are corrected drawing replacement sheets that replace the original Figs. 1, 2, 4, 6, 9 and 10 in order to correct formal errors to the figures which were objected to as failing to comply with 37 C.F.R. §1.84(p)(4).

Kindly direct any inquiries in connection with this matter to the undersigned at the below-listed address and telephone number.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344


Juan Carlos A. Marquez
Registration Number 34,072

REED SMITH LLP
3110 Fairview Park Drive
Suite 1400
Falls Church, Virginia 22042
(703) 641-4200

August 1, 2006

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COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	9	10	XXX (Over 20)	x \$50	0
Independent Claims	2	2	XXX (Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|--|--|
| [x] Response to Office Action
(with Claim Amendments) | [] Petition for Extension of Time |
| [] Substitute Specification | [] Terminal Disclaimer |
| [] Preliminary Amendment | [x] Letter to Draftsperson w/5 sheets of
replacement drawings |
| [] Information Disclosure Statement | [] Other _____ |

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [] A check in the amount of **\$0.00** to cover the _____ fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344


Juan Carlos A. Marquez
Registration No. 34,072

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Suite 1400
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